

## *Fact Sheet*

## *Office of Portfolio Analysis and Strategic Initiatives (OPASI)*

August 2006

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**OPASI** is the newly established Office of Portfolio Analysis and Strategic Initiatives within the Office of the NIH Director. The mission of the OPASI is to provide NIH and its constituent Institutes and Centers (ICs) with the methods and information necessary to manage their large and complex scientific portfolios, to identify – in concert with multiple other inputs -- important areas of emerging scientific opportunities or rising public health challenges and to assist in the acceleration of investments in these areas, focusing on those involving multiple ICs. Bringing together these diverse components of the agency will facilitate “functional integration” of NIH in a time of both unprecedented scientific opportunities and limited resources. OPASI will help the agency to increase its effectiveness and efficiency in advancing science, ultimately resulting in the acceleration of basic research discoveries and speed translation of those discoveries into applications that improve the health of the American people.

### Structure of OPASI

The OPASI will accomplish its mission through the activities of three divisions and an office of the director. The immediate office of the OPASI Director will act to coordinate the activities of these Divisions.

### ***Division of Division of Resource Development and Analysis (DRDA).*** The mission of the DRDA is to:

- to employ resources (databases, analytic tools, and methodologies), and
- to develop specifications for new resources, when needed, in order to conduct assessments based on

NIH and other databases in support of portfolio analyses and priority setting in scientific areas of interest across NIH.

DRDA will also be a resource for portfolio management at the programmatic level, should individual ICs request the Division’s expertise or tools.

***Division of Strategic Coordination (DSC).*** The DSC is responsible for integrating information and managing the process by which recommendations are developed to inform the priority-setting and decision-making processes of the NIH in formulating trans-NIH strategic initiatives. These initiatives will address exceptional scientific opportunities and emerging public health needs. The DSC will provide the Director with the information needed to allocate resources effectively for trans-NIH efforts. Although OPASI will not have grant-making authority, the DSC will provide an “incubator space” for trans-NIH initiatives, and support priority projects on a time-limited basis (5 to 10 years). This cycle will ensure that sufficient funds are available for continuous development of new, trans-NIH efforts. Support will come from pooled resources (the Common Fund). Coordination and oversight of the current NIH Roadmap for Medical Research initiatives will be conducted within the DSC.

***Division of Evaluation and Systematic Assessments (DESA).*** The DESA will plan, conduct, coordinate, and support program evaluations, including but not limited to:

- Institute and Center-specific program and project evaluations;
- Trans-NIH evaluations, including Roadmap initiatives;

- Systematic assessments such as those required by the Government Performance and Results Act (GPRA) and the OMB Program Assessment Rating Tool (PART).

The activities of the DESA will inform strategic planning and the coordination and evaluation of the NIH research agenda and portfolio, and provide essential information for determining NIH-wide resource allocations. The Division will establish, monitor, and report on GPRA performance goals and annual measures to track progress; ensure accountability and transparency in the implementation of the President's Management Agenda and the OMB PART process; develop and coordinate performance efficiency measures to document a system designed to improve performance in all areas of portfolio analysis and resource management; improve NIH performance by evaluating key initiatives and strategic objectives and tracking outcomes and recommendations; develop the theoretical framework and methodologies to evaluate organizational performance and demonstrate organizational effectiveness; and provide oversight and stewardship for the NIH Evaluation Set-Aside Program.

### **OPASI Budget**

The Office will make use of a "Common Fund" for shared NIH needs. The Common Fund is an annual set aside fund created from an agreed upon percentage of the annual budgets of each of the NIH ICs to support activities/efforts identified by the Office. Office operations will not be funded out of the Common Fund. [Roadmap for Medical Research](#) funds will serve as the baseline for the Common Fund. Current Roadmap Common Fund will grow from approximately 1.1% of the total NIH budget in FY 2006 to 1.7% in FY 2008. The Common Fund will not grow above the FY 2008 percent until increases in the annual NIH appropriation grows at a rate exceeding the inflation rate for biomedical research.

### **How Will New Initiatives Be Selected?**

Stakeholders, including the scientific and advocacy communities, will be invited to submit ideas for new initiatives on a regular basis. These nominations will be considered by OPASI leadership, external consultants; Institute and Center

(IC) Directors, representatives of the IC and other advisory councils and, and the NIH Director. Once approved as a new initiative, it will be assigned to a lead IC for further development and administrative oversight. Funds from the Common Fund will be used to support the initiative. The progress of each Initiative will be subject to rigorous review. There will be an annual review or progress, and a major review at year 3-4 that will determine the decision, made not later than year five, whether to renew the initiative for a final 5-year period, continue the research, but transfer support to an appropriate Institute or Center, or complete the Initiative. No Initiative will remain in OPASI for more than 10 years.

OPASI will be soliciting ideas for a new cohort of strategic initiatives in the Summer of 2006.